
Permission to Take a Graduate Course Overload

When to Use This Form

This form is for graduate students wishing to take course hours beyond the 15 credit hours standard for a single term.

Instructions for Graduate Students

1. Fill out all fields under the Graduate Students Only section, being sure to do the following:
 - Provide the number of hours beyond the 15 credit hours you intend to take.
 - Provide a justification for taking the number of hours you intend to take as an overload.
2. Sign the form using either an electronic signature (see the [Graduate School](#) for instructions) or print the form and sign with pen.
3. Give the form to your advisor, the Graduate Program Director for your program, or the Director of Graduate Studies for your department. If you have used an electronic signature, be certain to email the signed form to the Graduate Program Director.

Instructions for Advisor, Graduate Program Director, or Director of Graduate Studies

1. If the overload is approved, the Graduate Program Director must sign and date the form. If the form was emailed with an electronic signature, you may provide an electronic signature (see the [Graduate School](#) for instructions) and email the form to **gradspec@utk.edu**. Otherwise, deliver the form to the graduate school by one of the following methods:
 - scanning the form (after signing it) to PDF and emailing the PDF to the Graduate School at **gradspec@utk.edu (this email must come from the email of the advisor, graduate program director, or director of graduate studies)**
 - sending the form by campus mail to the Graduate School
 - delivering the form in person to the Graduate School

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Graduate Students Only

A copy of your class
schedule must accompany
this form

Year: _____ Term: Fall Spring Summer

Name: _____
Last First Middle

Signature: _____

Student ID #: _____ Email: _____

Date of Request: _____ Current GPA: _____ Major: _____

How many terms have you attempted an overload? _____

Please explain the need to take an overload during the specified term, including total number of hours:

Please list the course(s) that you wish to take beyond 15 credit hours:

Course Name/Prefix: _____ Hrs: _____ CRN: _____
Ex., SPAN 421

Course Name/Prefix: _____ Hrs: _____ CRN: _____

Course Name/Prefix: _____ Hrs: _____ CRN: _____

Advisor, Graduate Program Director, or Director of Graduate Studies

Printed Name of Graduate Program Director

Signature of Graduate Program Director

Date

To be completed by the Graduate School

Dean of the Graduate School

Approval Date